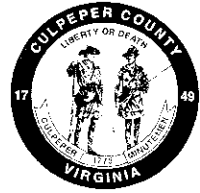


Department of Development
Office of the Building Official
302 North Main Street
Culpeper, VA 22701
540/727-3405 fax 540/727-3461



ZONING PERMIT and BUILDING PERMIT APPLICATION

Application should reflect actual work being performed.
Application must be filled out completely - if not, it will be returned.

Owner	Mailing Address	Zip	Phone
Contractor	Mailing Address	Zip	Phone
Fax	Email address	cell phone	
License No.	Class	Exp. Date	Contract Amount
Health Permit No.: _____		No. of Bedrooms _____	
Special Conditions: _____			
Type of water supply:	_____ Public	_____ Private (well)	
Type of sewage disposal:	_____ Public	_____ Private (septic tank)	
Power Company _____	Size of Service _____	Amps _____	Access Code _____

-----ADMINISTRATIVE USE ONLY-----

Tax Map No. _____ Parcel No. _____ Lot No. _____ Building No. _____

Magisterial District _____ Zoning District _____ Lot size _____

Historical District ____ yes ____ no Flood Plain ____ yes ____ no VDOT Permit No. _____

APPLICATION FOR

Directions: _____

*Special notes for BOCA Sheet: _____

Setbacks: Front _____ Rear _____ Right Side _____ Left Side _____

Remarks: _____

CAUTION: It is the responsibility of the person issued this permit to insure adherence to all zoning and building regulations.

Signature of
Owner or Authorized Agent _____ Date _____

Owner/Agent - Print Name _____

Approved by
Zoning Administrator _____ Date _____

CODE BEING USED

_____ IBC (International Building Code - Commercial)	_____ Edition	
_____ IRC (International Residential Code)	_____ Edition	
_____ CABO One & Two Family Dwelling *	_____ Edition	* until 10/1/04
_____ BOCA National Building Code (Commercial) *	_____ Edition	
_____ IPC (International Plumbing Code)	_____ Edition	
_____ IMC (International Mechanical Code)	_____ Edition	
_____ NEC (National Electrical Code)	_____ Edition	

SCOPE OF WORK

_____ New Building	_____ Addition	_____ Alteration
_____ Repair/Replacement	_____ Demolition	_____ Moving
_____ Mobile Home	_____ Other _____	

Estimated Value of Completed Work _____**Estimated Time of Construction** _____**Maximum Occupant Load (Commercial)** _____**USE GROUP**

_____ Assembly (A-)	_____ Business (B-)	_____ Educational (E-)
_____ Factory (F-)	_____ High Hazard (H-)	_____ Institutional (I-)
_____ Mercantile (M-)	_____ Residential (R-)	_____ Storage (S-)
_____ Utility	_____ Other - specify _____	

TYPE OF CONSTRUCTION

1A _____ 1B _____ 2A _____ 2B _____ 3A _____ 3B _____ 4 _____ 5A _____ 5B _____ Modular _____

Building Height _____	Building Area _____
Number of Stories _____	Number Dwelling Units _____
Fire Rating in Hours _____	Floor Live Load _____
Sprinkler System _____ yes _____ no	Alarm System _____
Manufactured Trusses _____ yes _____ no	Roof Live Load _____
Slab _____	Crawl Space _____ Basement _____

TYPE OF FOUNDATION

_____ Masonry	_____ Formed Cement	_____ Precast Concrete
_____ Pressure Treated Wood	_____ Other - Specify _____	

TYPE OF WALL CONSTRUCTION

_____ Wood Frame	_____ Masonry Bearing	_____ Structural Steel
_____ Reinforced Concrete	_____ Other - Specify _____	

TYPE OF SIDING

Brick _____ Wood _____ Vinyl _____ Aluminum _____ Stone _____ Other _____

TYPE OF HEATING

Gas _____ Oil _____ Electric Baseboard _____ Electric Furnace _____ Heat Pump _____ Other _____

TYPE OF MECHANICAL

Air Conditioning _____ Elevator _____ Gas Line _____ Other _____

Number of Bedrooms _____ **Number of Full Baths** _____ **Number of Half Baths** _____

GROSS FLOOR AREA:

ADMINISTRATIVE USE ONLY

	Yes/No	Size - Sq. Ft
Finished Basement		
Unfin. Basement		
1st Floor		
2nd Floor		
3rd Floor		
Attached Garage		
Detached Garage		
Basement Garage		
Carport		
Deck #1		
Deck #2		
Screened Porch		
Unscreened Porch		
Patio		
Stoop		
Other		
In ground Pool		
Above Ground Pool		
Accessory Building		
# of fireplaces		
# of flues		

[illegible]

Certificate of Occupancy **

Setback **

Site work **

Pre-work **

Review **

Change of Use **

Copies #_____

Subtotal:

1.75% Levy per USBC

Zoning Permit

Total:

LIEN AGENT

Name and Title

Address

City, State, Zip

Phone and fax

None Designated

NOTE: THIS DOCUMENT CONTAINS IMPORTANT INFORMATION CONCERNING THE VIRGINIA CONTRACTOR'S LICENSING LAW. PLEASE READ CAREFULLY BEFORE SIGNING

OWNER/CONTRACTOR - AFFIDAVIT

I _____ of (address) _____ affirm that I am the owner of a certain tract or parcel of land located at _____ in the County of Culpeper and that I have applied for a building permit to erect a structure on said land or repair or improve an existing structure on said land.

I affirm that I am aware of the provisions of Title 54.1, Chapter 11, Code of Virginia that requires a contractor to be properly licensed before he may bid or undertake contracting work of \$1,000 or more. I further certify that I am familiar with the responsibilities of an awarding authority specified in Section 54.1111 of the Code which prohibits any awarding authority from issuing permits or allowing the issuance of such permits to any contractor not properly licensed under the provisions of the Code, and that to do so would constitute the commission of a misdemeanor.

I affirm that I understand that a contractor must be licensed as a Class C contractor for any job of \$1,000 or more, but less than \$7,500; that a contractor must be licensed as a Class B contractor for any job of \$7,500 or more but less than \$70,000; and that a contractor must be licensed as a Class A contractor for any job of \$70,000 or more.

I affirm that I am duly licensed under the terms of Title 54.1, Chapter 11, Code of Virginia to carry out or superintend this work; OR I am not subject to licensure as a contractor, subcontractor, or owner-developer pursuant to such title. I affirm that I have paid in full any license fees required by any county, city, or town so as to qualify me to bid upon or contract for the work for which this permit has been applied.

This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor/Authorized Agent

Print Name

Date

Signature of Owner (if owner/builder)

Print Name

Date

THIS PAGE IS FOR RESIDENTIAL USE ONLY

COMMERICAL SUBCONTRACTORS will need to submit plans and complete separate permit applications for electrical, plumbing and mechanical work.

ELECTRICAL PERMIT - Code being used :

Name of Contractor _____

Mailing Address _____ Phone: _____

Email address _____ cell ph _____

City State Zip _____ Fax: _____

State Contractor's License No.: _____ Class: _____ Exp. Date _____

Tradesman Certification No.: _____ Exp. Date: _____

Estimated Value of Work: \$ _____ Signature: _____

Print: _____

PLUMBING PERMIT - Code being used:

Name of Contractor _____

Mailing Address _____ Phone: _____

Email Address _____ cell ph _____

City State Zip _____ Fax: _____

State Contractor's License No.: _____ Class: _____ Exp. Date _____

Tradesman Certification No.: _____ Exp. Date: _____

Estimated Value of Work: \$ _____ Signature: _____

Inside Gas Lines: _____ Outside Gas Lines: _____ Print: _____

MECHANICAL PERMIT - Code being used:

Name of Contractor _____

Mailing Address _____ Phone: _____

Email address _____ cell ph _____

City State Zip _____ Fax: _____

State Contractor's License No.: _____ Class: _____ Exp. Date _____

Tradesman Certification No.: _____ Exp. Date: _____

Estimated Value of Work: \$ _____ Signature: _____

Inside Gas Lines: _____ Outside Gas Lines: _____ Print: _____

PERMIT INFORMATION FOR DOUBLE OR SINGLE WIDE MOBILE HOMES

MOBILE HOME

Use Permit No. _____

Name of Mobile Home Park _____

Date of Manufacture _____

Make/Model _____

Single Wide _____ Double Wide _____

Value \$ _____

Sq. Ft. _____

Tie Down _____

* Fees _____

1.75 % Levy _____

Zoning _____

Total _____

electric, plumbing,
mechanical permits
are sold separately

** FEES FROM PAGE 3 OF APPLICATION*